

Hamilton

Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

COMMITTEE NAME

JAN 15 2003

| | |
|---|-----------|
| Official Name of Committee | |
| HAMILTON COUNTY TAXPAYERS ASSOCIATION INC | |
| Street | |
| 2042 CHASE AVE. WEBSTER CITY, IOWA 50595 | |
| City, State, Zip Code | |
| 515-543-5703 | |
| Area Code | Telephone |
| () | |

Effective date of dissolution:

1-15, 20 03

Mammie
Signature of Treasurer

1/15/2003
Date Signed

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with Iowa Code section 56.42 and rule 351 IAC 4.42.

Signature of Candidate - Required for Candidate's Committee

Date signed

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached. The final bank statement may be sent in later if it is not available at the time the Notice of Dissolution is filed.

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

FORM

(Rev. 02/02)

DR-3 NOTICE OF DISSOLUTION

For Office Use Only

Comm. # 25055
Indexed ☒
Audited ☐
Computer ☐
Certified Date of Dissolution